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<b>Effective on 12/08/2004.</b> Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		Application Number	09/847091-Conf. #5732
		Filing Date	May 1, 2001
		First Named Inventor	Eric A. SWANSON
		Examiner Name	D. S. Kim
		Art Unit	2633
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Attorney Docket No.	SYCS-042RCE	
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b> 1,360.00		

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

**Total Claims** 27 - 28 =        x        =        **Fee Paid (\$)**

**Indep. Claims** 3 - 3 =        x        =        **Fee Paid (\$)**

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
<u>      </u> - 100 = <u>      </u> /50 <u>      </u> (round up to a whole number) x <u>      </u> = <u>      </u>				

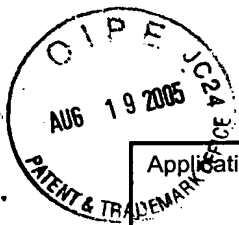
**4. OTHER FEE(S)**

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1253 Extension for response within third month	570.00
1801 Request for continued examination (RCE) (see 37 ...)	790.00

<b>SUBMITTED BY</b>		Registration No.	42,482	Telephone	(617) 227-7400
Signature		(Attorney/Agent)		Date	August 19, 2005
Name (Print/Type)	Sean D. Detweiler				

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 745889339 US, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: August 19, 2005 Signature: (Sean D. Detweiler)



Application No. (if known): 09/847091

Attorney Docket No.: SYCS-042RCE

## Certificate of Express Mailing Under 37 CFR 1.10

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on August 22, 2005  
Date

  
Signature

Sean D. Detweiler

Typed or printed name of person signing Certificate

42,482  
Registration Number, if applicable

(617) 227-7400  
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page) w/duplicate copy  
Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)  
Request for Continued Examination Transmittal (1 page)  
Amendment After Final Action (37 C.F.R. Section 1.116) (8 pages)  
Return Receipt Postcard  
Charge \$1,360.00 to deposit account 12-0080